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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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	OMB control number.						
	DECLARATION FO	R UTILITY OR	Attorney Docket Number	17960-231			
/ 0	S N DESIG	N i	First Named Inventor	William L. NIghan, Jr.			
ا	7 2001 SATENT APPL	ICATION	COMPLETE IF KNOWN				
SEP ?	(37 CFR	1.63)	Application Number	09/872,865			
Br.	Declaration Submitted OR	Submitted after Initial Filing (surcharge	Filing Date	June 1, 2001			
	with Initial OR		Group Art Unit	1633			
	Filing	(37 CFR 1.16(e)) required)	Examiner Name	Not Yet Assigned			
		required)	Examiner ivallie	1101 1011 1013			

As a below named Inventor, I hereby declare that:											
My residence, post office address, and citizenship are as stated below next to my name.											
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:											
DIODE PUMPED, MULTI AXIAL MODE INTRACAVITY DOUBLED LASER											
	(Title of the Invention)										
the specification of which is attached hereto OR											
OR was filed on (MM/DD/YYYY) 06/01/2001 as United States Application Number or PCT International											
Application Number 09/872,865 and was amended on (MM/DD/YYYY) [(if applicable).											
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.											
I acknowledge the duty to d	isclose information v	which is material to pate	entability as defined in 37 CF	K 1.36.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or [365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.											
Prior Foreign Application Foreign Filing Date Priority Certified Copy Attached?											
Number(s)	Country	(MM/DD/YYYY)	Not Claimed	YES	NO						
☐ Additional foreign applic	cation numbers are l	listed on a supplementa	al priority data sheet PTO/SE	3/028 attached here	to:						
I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.											
Application Number	er(s)	Filing Date (MM/DD	Add nur	ditional provisional nbers are listed on oplemental priority o O/SB/028 attached	a lata sheet						

(Page 1 of 2)

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PTO/SB/01 (12-97)
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DECLARATION — Utility or Design Pat nt Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

between the filing date of the prior application and the national or PCT international filing date of this application.														
U.S. Parent Application or PCT Parent Number							Parent Filing Date (MM/DD/YYYY)			Pai	Parent Patent Number (if applicable)			
08/446,203									/19/19			·•		
09/070,478								04	/30/19	98				
-														
☐ Additional U.S.	or PCT	international appli	cation n	umbers	are listed	l on a	suppleme	ental p	riority	data she	 et PTO/SB/	/028 atta	ached hereto.	
Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto. As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the														
Patent and Tradema					tomer Nu					<u> </u>		1	Place Customer .	
OR Number Bar Code Label here														
Registration Registration Registration Registration											egistration			
N	lame			Numb		_			Name	•		Number		
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Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.											ned hereto.			
Direct all correspondence to: Customer Number or Bar Code Label OR Correspondence address below									address below					
Name	Paul [Davis	Davis											
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City	Palo A	Alto State CA						Α	ZIP	94304				
Country	U.S.	Telephone 650-493-9300							Fax 650-493-6811					
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.														
Name of Sole or First Inventor: A petition has been filed for this unsigned inventor									entor					
Given Name (first and middle (if any)							Family Name or Surname							
William L.						Nighan, Jr.								
Inventor's Signature							Date	9/	11/01					
Residence: City		Menio Park	s	tate	Califo	rnia	Country		ι	JSA	Citizen	ship	USA	
Post Office Addre	nue													
Post Office Address													T	
City Menlo Park			1	tate	Californ		ZIP		94025		C untry US		USA	
Additional inventors are being named on the 1 (One) supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:														

Please Type a plus sign (+) inside this box

PTO/SB/02A (3-97)
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DECLARATION 27 200

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 1

	15	<u> </u>									
Name of Additional Joint Inventor, it it is a petition has been filed for this unsigned inventor											
Given Name	Family Name or Surname										
John 0 0				Cole							
Inventor's Signature	Signature fold to				Date 7-30						
Residence: City	Sunnyvale	State	Californi		Country	USA	Citizenship		USA		
P st Office Address	1258 Ortiz Court										
Post Office Address											
City	Sunnyvale	State	Califo	rnia	ZIP	94089	Country		USA		
Name of Additional	Joint Inventor,	if any:		☐ A petition has been filed for this unsigned inventor							
Given Name	(first and middle (if	any)		Family Name or Surname							
Inventor's Signature			Date								
City		State			Country		Citizenship				
Post Office Address											
Post Office Address											
City		State		_	ZIP		Country				
Name of Additional Joint Inventor, if any:							inventor				
Given Name	Family Name or Surname										
Inventor's Signature		Dat				Date					
City		State			Country		Citizensi	hip			
P st Office Address	P st Office Address										
Post Office Address											
City		State		ZIP		Country					

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